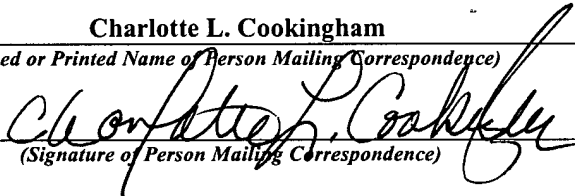


CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10) Applicant(s): David L. MALLIS			Docket No. 09432/168002	
Serial No. 09/843,560	Filing Date April 26, 2001	Examiner D. Tugbang	Group Art Unit 3729	
Invention: TUBULAR HOOD WEAR INDICATOR				
<p>I hereby certify that the following correspondence:</p> <div style="border: 1px solid black; padding: 10px; min-height: 40px;">Response to Office Action dated November 19, 2003</div> <p style="text-align: center;"><i>(Identify type of correspondence)</i></p> <p>is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on</p> <p style="text-align: center;"><u>February 19, 2004</u> <i>(Date)</i></p> <div style="text-align: right; margin-top: 20px;"><p>Charlotte L. Cookingham <i>(Typed or Printed Name of Person Mailing Correspondence)</i></p><p> <i>(Signature of Person Mailing Correspondence)</i></p><p>EV 323173020 US <i>("Express Mail" Mailing Label Number)</i></p></div>				
Note: Each paper must have its own certificate of mailing.				
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AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): DAVID L. MALENS	Docket No. 09432/168002
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Serial No. 09/843,560	Filing Date April 26, 2001	Examiner D. Tugbang	Group Art Unit 3729
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Invention: **TUBULAR WEAR INDICATOR**

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	23 -	23 =	0	x \$18.00	\$0.00	
INDEP. CLAIMS	5 -	5 =	0	x \$86.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **50-0591**
 - ☐ Any additional filing fees required under 37 C.F.R. 1.16.
 - ☒ Any patent application processing fees under 37 CFR 1.17.

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Dated: *2/19/04*

Signature

Jonathan P. Osha, Reg. No. 33,986
ROSENTHAL & OSHA L.L.P.
1221 McKinney Street, Suite 2800
Houston, Texas 77010
Telephone: (713) 228-8600
Facsimile: (713) 228-8778

I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence

CC:



PATENT
ATTORNEY DOCKET NO.: 09432/168002
U.S. PATENT APPLICATION SERIAL NO.: 09/843,560

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : David L. Mallis
Serial No.: 09/843,560
Filed : April 26, 2001
Title : TUBULAR JOINT WEAR INDICATOR

Art Unit : 3729
Examiner : D. Tugbang
Confirmation No: 9436

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY UNDER 37 C.F.R. § 1.111

Dear Sir:

In response to the Office Action dated November 19, 2003, please amend the application as follows and consider the included remarks.

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FEB 26 2004

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